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Bib Data Sheet

CONFIRMATION NO. 4987

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>10/622,492 | <b>FILING OR 371(c)<br/>DATE</b><br>07/21/2003<br><b>RULE</b> | <b>CLASS</b><br>514 | <b>GROUP ART UNIT</b><br>1614 | <b>ATTORNEY DOCKET<br/>NO.</b><br>330499.00009 |
|------------------------------------|---|---------------------|-------------------------------|--|

## APPLICANTS

Karen Jackson, Deepcar Sheffield, UNITED KINGDOM; *SDA*

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 10/349,431 01/22/2003 PAT 6,713,470 which is a CIP of 10/108,659 03/27/2002 ABN  
which is a CIP of 10/053,962 01/22/2002 ABN *SDA*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

UNITED KINGDOM 0208129.7 04/09/2003 *SDA*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

11/25/2003

|  |  |                        |                       |                            |
|--|--|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no   | STATE OR<br>COUNTRY<br>UNITED<br>KINGDOM | SHEETS<br>DRAWING<br>1 | TOTAL<br>CLAIMS<br>45 | INDEPENDENT<br>CLAIMS<br>2 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |  |                        |                       |                            |
| Verified and Acknowledged <i>[Signature]</i><br>Examiner's Signature   | <i>SDA</i><br>Initials                   |                        |                       |                            |

## ADDRESS

27160

## TITLE

Method of treatment

|  |   |  |
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| <b>FILING FEE<br/>RECEIVED</b><br>1330 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                              |
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